

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

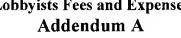
I. Name of Lobbyist	Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Leann Moccia				
II. Name of lobbyist	's partnership, f	irm or corporation, i	if any:		
Legi	slative Solutions	s. L.L.C.			
		firm or corporation)			
P.	O. Box 10724	Bedford	NH	031	10
Business Address: (S	treet)	(Town/City	(State)	(Zi	p Code)
() 603-986-914	45	() e-mail dbeek@aol.com			
(Telephone)		(I	-rax)		
reportable expense	transactions whi	ch are not attributab	ports for each client, OR you le to any one client).		·
All reportable tra			to the reporting date relative t	o the following o	lient:
	<u>-</u>	shire Camp Director			
OR	(Full Name of C	lient as it appears on the	: Lobbyist Registration Form)		
	•	obbyist (including the	lobbyist's family), or the lobb	ying firm listed b	elow which are
IV. Date of Report	April 26, 201		July 26, 2017	2/1=	
Reports cover: acti	-	egistration to 3/31/17	activity from 4/1/17 to 6/30		
	October 25, 2 activity from 7/1/		January 31, 2018 activity from 10/1/17 to 12	2/31/17	
		_	ble transactions made sinc o the Secretary of State's Offic	-	
VI. Check if additio	nal renorts are a	ittached:			
1	•		st file Addendum A – Fees an	d Expenses	
	an honorarium or		, you must file Addendum B -		rariums or
•		as made political cont	ributions, you must file Adder	ndum C – Politic	al Contributions
Sworn Statement/A: I have read RSA 15, and complete to the b	RSA 15-B, RSA	14-C and RSA 664 an	d hereby swear or affirm that t January 15, 201		ormation is true
(Signature of lobbyis	st)		(Date)	OFW/FD
Debra Vanderbeek				RE	CEIVED
(Print Name of lobby	vist)				ΔN 1 7 2018

NEW HAMPSHIPE DEPARTMENT OF STATE

E A P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karout	as, Leann Moccia
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C. (Name of partnership, firm or corporation)	
	Date January 15, 2018
III. Name of Client NH Camp Directors Association	Date January 13, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The granded by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 0
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ 4,500.00 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 4,500.00
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office eximply included expenses where the expenditure was of \$25.00 or less (for examply lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of a le: meals purchased during a businesses than \$10 that is given to the personal with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of the er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 0
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>4,500.00</u>
f) Total of all expenses year to date	f) \$ _4,500.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lo period, including by whom paid or to whom charged.	bbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	that the foregoing information
	January 15, 2018
(Signature of lobbyist)	(Date)
Debra Vanderbeek (Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Stater	nent/Aff	ïrma	tion	by	Lobby	ist
Statem	ent of	Income	and	Expe	ense	s for:	

Name of Lobbying partnership, firm, or corporation	on: Legislative Solutions
	e partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ O	ctober 25, 2017 January 31, 2018
	tatement of Income and Expenses described above, and tatement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
complete to the best of my knowledge and belief.	January 15, 2018
(Signature of lobbyist)	(Date)
Robert Clegg	_
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation	on: Legislative Solutions
	e partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ O	ctober 25, 2017 January 31, 2018
	tatement of Income and Expenses described above, and tatement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing inform complete to the best of my knowledge and belief.	nation on the Statement and each Addendum is true and
	January 15, 2018
(Signature of lobbyist)	(Date)
Periklis Karoutas (Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Aff	ĭrma	ation by	Lobbyist Lobbyist
Statem	ent of	Income	and	Expens	ses for:

4	
Name of Lobbying partnership, firm, or corporation:	
particular client):	partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □ Octo	ober 25, 2017 □ January 31, 2018 🕱
	ement of Income and Expenses described above, and ement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
complete to the best of my knowledge and belief.	January 15, 2018
(Signature of lobbyist)	(Date)
Leann Moccia	
(Print Name of lobbyist)	